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THE EFFECTS OF PERCEIVED RACISM AND DISCRIMINATION ON THE
MENTAL HEALTH OF MEXICAN AND MEXICAN AMERICAN SOCIAL WORK
STUDENTS

A Project
Presented to the
Faculty of
California State University,
San Bernardino

In Partial Fulfillment
of the Requirements for the Degree
Master of Social Work

by
Karina Duque Sierra

May 2021

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ABSTRACT

Research has shown that experiencing discrimination and racism can have significant and negative effects on people's mental health. Among those affected are Mexicans and Mexican Americans in the United States. The purpose of this study was to examine if there was a relationship with self-reported mental health of Mexican/Mexican American social work students and self-reported experiences with racism and discrimination. This quantitative study surveyed 101 participants who (a) identified as Mexican and or Mexican American, (b) were 18 years or older (c) enrolled in college, and (d) identified as either a BASW or MSW student. This study utilized a Qualtrics online survey that was provided via email and social media platforms to gather participants self-reported discrimination, racism, and mental health experiences. Univariate statistics and bivariate statistics were utilized to describe the sociodemographic characteristics of this sample whereas Chi-Square tests were utilized to examine whether participants experiences with racism and discrimination correlated with CES-D 10 scores. The results of this study indicated a significant relationship between the mental health of Mexican and Mexicans American social work students and their experience with racism and discrimination. This study revealed a statistically significance between a person's ancestry/national origins, gender, age, socioeconomic status, color of skin, and experience with a plumber/car mechanic. Those who had a higher level of stress were more likely to report feeling discriminated against than those with a low level of stress. The findings

from this project help understand the importance of mental health programs to be implemented in school settings and the importance of policy advocacy within administrations. Limitations to this study and suggestions for future research are also discussed.

DEDICATION

This project is dedicated to my mother Obdulia Sierra Mendoza. Thank you for always supporting and believing in me even when I didn't believe in myself. Thank you for giving me your strength, your power, and your resilience. Just when I thought I couldn't do it anymore you showed me the way. I will forever remember you going out of your way to get me where I am today. Your sacrifices will never be forgotten, and I will always cherish them all. I wish I would have been able to thank you for everything you did for me, but I know you are so proud of me and will have the best seat in the house on the day of graduation. I love you, mom.

Este proyecto está dedicado a mi madre Obdulia Sierra Mendoza. Gracias por apoyarme y creer siempre en mí, incluso cuando no creía en mí misma. Gracias por darme su fuerza, su poder, y su resistencia. Justo cuando pensaba que ya no podía hacerlo, me mostraste el camino. Siempre recordaré que hiciste todo lo posible para que yo llegara aquí. Tus sacrificios nunca serán olvidados y siempre los apreciaré.. Ojalá hubiera podido agradecerte por todo lo que hiciste por mí, pero sé que estás muy orgullosa de mí y tendrás el mejor asiento de la casa el día de la graduación. Te amo ama.

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CHAPTER ONE

PROBLEM FORMULATION

Mexican-origin immigrants are currently one of the largest groups of foreign-born individuals in the United States. About 69% of the overall Latin population consists of Mexican and Mexican American children and adolescents (Santiago et al., 2018) and it is expected to increase to one in three children by the year 2050 (Kim et al., 2018). Because the number of Mexican and Mexican American children is expected to increase in the years to come it is important to think about their mental health and how we can help them since they will one day comprise a huge portion of the United States workforce (Rothe & Pumariega, 2010). In this study, mental health will be defined as the cognitive, behavioral, and emotional well-being.

Purpose of the Study

Many Mexican and Mexican American families fall into two different types of categories when it comes to mental health. Those who are not aware of what mental health is and those who are aware of what mental health is but do not approve of it for many reasons. Some of those reasons why they do not approve of it may be because of what their family may think of them, or because they think mental health is for the “crazy” people and they do not consider their child crazy (Knifton et al., 2010) and lastly because some may think “it is plain dumb”. This belief and opinion from immigrant parents cause many Mexican and Mexican American children to learn to internalize their mental health problems at

an early age. Studies have shown that Mexican and Mexican American females are at a higher risk to commit suicide than Mexican and Mexican American boys due to the internalizing depression and anxiety (Marks et al., 2015). Mexican and Mexican American students are at higher risk for mental health problems due to cultural stressors such as discrimination and racism.

Some other factors that contribute to the mental health of Mexican and Mexican American children are traditional gender roles at home, familismo, religious, and norms (Corona et al., 2017). These factors have implications for policy in that it stresses the importance of culture support programs in school settings and the importance for school staff to be culturally competent. By training staff and school personnel to be culturally competent, Mexican, and Mexican American children will be getting the support they should be receiving in school settings. Cultural competence includes, but is not limited to, the understanding of the dynamic's differences, the awareness and acceptance of differences, and the ability to adapt to cultural context (Pumariega & Rothe, 2010). The findings of this problem may impact policy in that it will show people the real issues that immigrant families face in the United States along with the mental health problems that Mexican and Mexican American students face. After the findings of the problem, people will hopefully participate in politics/campaigns to demand change within the immigrant community. Policies will be established and directed for Mexican families and mental health services will be provided.

Significance to Social Work Practice

The findings from this study will also have major implications for social work practice, on both a micro and macro level. At the micro-level, these findings will help social workers become effective social workers to Mexican and Mexican American children's and their families. These findings will give social workers the direction in which they should approach and treat a Mexican and Mexican American family. For example, how to incorporate coping strategies like emotion regulation and problem-solving. It will also educate social workers to be more aware of cultural factors and be more culturally competent within Mexican and Mexican American families (Santiago et al., 2018). If the importance of mental health and the effects of cultural stressors begin to get normalize and or taught within Mexican and Mexican American families then a decrease in poor mental health among Mexican and Mexican American children will begin to decrease.

The findings would apply to macro social work because it will help promote the need to invest in the health, education, and social welfare of immigrant families (Rothe & Pumariega, 2010). It will also help people understand the importance of developing and implementing acculturation policies and practices for immigrants. By advocating for a child's mental health needs and addressing access to proper care, getting involved in policy change like participating in rallies and demonstrations, the chances of helping create programs across schools, churches, and public organizations (Mishori, 2020). These policy changes will allow children to feel supported across all environments; they will be more

involved, thus feeling accepted within the community (Rothe & Pumariega, 2010). Also, promoting mental health interventions especially among our Mexican and Mexican American families and communities will help reduce stress among our Mexican and Mexican American families and help many Mexican and Mexican American children with their mental health problems.

In learning the different ways cultural stressors affect Mexican and Mexican American's children's mental health the more social workers will be able to help in both micro and macro settings. In a micro setting, they can provide one on one therapy sessions as well as family sessions and in a macro setting, they can advocate for certain policies/programs and they can input those policies/ programs into places like schools, churches, and communities to help support Mexican and Mexican American families and children. With that said, the research question for this project is as follows: Do self-reported experiences with racism and discrimination have a relationship with the self-reported mental health of Mexican and Mexican American social work students?

CHAPTER TWO

LITERATURE REVIEW

Introduction

The U.S population of Mexican and Mexican Americans is continually increasing. Mexican and Mexican American students have a higher college dropout rate (Arbona & Jimenez, 2016). These findings have suggested that if Mexican and Mexican's American students continue to drop out among other races (White and African American) then the next generation will be undereducated (Arbona & Jimenez, 2016). Members of the cultural minority group are more likely to experience cultural stressors problems like discrimination, language barriers, and immigration-related stress which may affect their academic and well-being overall.

In this current study, the first-generation status will be defined as neither parent has earned a bachelor's degree (Stebbleton et al., 2014). Mental Health will be defined as the overall well-being of an individual. Since Mexican and Mexican's American individuals are exposed to numerous factors that they are not familiar with. They are at higher risk for poor mental health. According to the Mental Health Foundation (2008), mental health is defined by how individuals think and feel about themselves and their life (Stebbleton et al., 2014).

Cultural Stressors

Mexican and Mexican American students face several stressors growing up because of the immigration status of their parents. They face mental health problems like anxiety and psychological stress, and cultural stressors like discrimination, acculturative stress, and racism (Corona et., al, 2016).

Discrimination

According to Rios-Salas and Larson (2015), one of the most cited and studied cultural stressors is discrimination. Discrimination is defined as a negative attitude, judgment, or unfair treatment toward members of a group (Salas & Larson 2015). Evidence has shown that Mexican and Mexican American individuals experience discrimination both on an individual level and on a group level. On an individual level, Mexican and Mexican American individuals are discriminated against due to their ethnic identity, their English-language ability, and immigration status. At a group level, Mexican and Mexican American individuals are discriminated against in school settings and work settings (Salas & Larson 2015). Salas and Larson (2015) concluded in their study that Mexican and Mexican American adolescents who perceived more societal discrimination were more likely to report depressive symptoms.

Kim and colleagues (2018), explain that Mexican and Mexican American children experience discrimination in three different ways. The first way is they experience discrimination every day as a measure of overall mistreatment. Second is they experience discrimination based on one's race or ethnicity and

lastly, they face discrimination based on the assumption that Mexican and Mexican American children of immigrants are foreigners even if they were born in the United States (Kim, et al., 2018). Discrimination experiences can vary according to Kim and colleagues. One may experience discrimination from school colleagues, teachers, friends, and some may experience it from their parents regardless, either one influences the mental health of a Mexican and Mexican American child (Kim, et al., 2018).

Immigrations-Related Stressors

Approximately 40 million undocumented immigrants currently live all over the United States (Pumariiega & Rother, 2010). Many families enter the United States because they are trying to reunite with their families. They are looking for better life opportunities or they are running away from someone who is trying to hurt them (Pumariiega & Rothe, 2010). When an immigrant family decides to enter the United States, they are afraid. They must learn a new culture, new values, and norms, and they must learn to adapt quickly. They leave behind the support of their family, and they face many economic challenges, psychological stress, and multiple traumas all alone (Pumariiega & Rothe, 2010). Some immigrants, however, resent the new culture and try to maintain their cultures, values, and norms in the United States. Some have difficulty learning the new language, the new culture, and adapting to it all. Mexican American children of immigrant parents then become the language translators, the teachers, the guides, and the protectors for their parents.

Mexican and Mexican American individuals take on a responsibility that they never asked for. Mexican and Mexican American children grow up with many different immigrant-related stresses due to immigration policies, concerns with family separation, and hypervigilance related to the possibility of having a parent arrested or deported for no reason other than being an immigrant in the United States (Santiago, et al., 2018). Other immigrant-related stress could be an economic strain, frequent moves and transitions, and family conflicts. All this immigrant-related stress accumulates and contributes to the development of mental health problems among Mexican and Mexican American children (Santiago, et al., 2018).

Language Barriers

Kim and colleagues (2011) explained how language barriers can pose problems in mental health care for immigrant individuals. In their research, it was reported that more than half (51.0%) of the U.S immigrant population did not know English very well. A language barrier can prevent someone from ordering their favorite food at a restaurant to not getting medical care at the clinic because they cannot communicate their symptoms with whoever is at the front desk. Language barriers affect many immigrants in both their academic performance and their well-being (OECD, 2018). When immigrant parents migrate to the United States, they face many language barriers challenges which may result in economic hardships and cheap labor jobs. When immigrant parents have children, they then struggle to try to teach them English because some may have

never learned it due to the difficulty of it. If a child from an immigrant family learns English at home it helps them develop a sense of belonging at school, and it encourages the child to be actively at school and the community thus helping them fit in and go to college. If the child does not learn English at home the child starts school facing different language barriers, feeling embarrassed and uncomfortable with society's values thus giving them a sense that he/she does not belong (OECD, 2018). Language barriers are the first of many challenges a Mexican and Mexican American will face.

Studies Focusing on Mental Health

It has been reported that Mexican and Mexican Americans often report feeling severe depression. Mexican and Mexican American women, however, are at a higher risk for depressive symptoms and suicide attempts than men (Brietzke & Perreira, 2017). This study reviews and shows if there is a relationship with the self-reported mental health of Mexican American social work students with racism and discrimination. Though some research targeted on the mental health of the Mexican and Mexican American population along with solutions to help the Hispanic community with their mental health there is no research the mental health of social work students. In an article by Brietze and Perreira (2017), they utilized an Ecological Model of Child Development with a Stress Process Model to understand how family, school and community impact the Latino youth. They utilized qualitative interview data that was collected from

the Southern Immigrant Academic Adaptation (SSIA) study to look at the experiences of some Mexican and Mexican American children. They were able to conclude and determine what stressors impact a Mexican and Mexican American child. Some barriers and limitations that they had in the study where they focused solely on the youth in one region of the country, so their data was not reliable nor consistent. They also did their study during historical time (the Great Recession) which could have impacted the answers to some of the survey questions they had (Brietzke & Perreira, 2017).

In a different study from the article Associations between cultural stressors, cultural values, and Latina/o college student's Mental Health they explore if cultural values like familismo, respeto, and religiously as well as traditional gender roles were related to Latina/o college students' symptoms like psychological stress and anxiety (Corona et al., 2016). They interviewed 198 Latina/o students who were recruited from three university campuses across the Southeastern region. In this study, they utilized a cultural value scale called Mexican American Cultural Value Scale which consisted of thirty-six items. They asked questions all of which consisted of the cultural values that they considered were cultural stressors. They concluded that on average participants experience depressive and anxiety symptoms at a low to moderate level whereas psychological stress at a moderate to a high level (Corona et al., 2016). One limitation that they had was that they offered the survey in Spanish and they assumed that offering it in Spanish It affected their data because the language

difference might have made the participants think about the question and answer in a different way.

Theories Guiding Conceptualization

A theory that conceptualizes the ideas in this study is the acculturation theory. Redfield, Linton, and Herskovits (1936), define acculturation as having different groups of individuals with different cultures and coming into contact thus changing the original culture for both. The International Organization for Migration (IOM) defined acculturation as the adoption of ideas, values, norms, and behavior by a person group or class. John Berry developed a model where he created four different acculturation categories because he believed everyone was different and everyone acculturated differently. Those four categories are assimilation, separation, integration, and marginalization (Schwartz et al., 2013).

This theory helps understand how Mexican and Mexican's American students have poor mental health. When Mexican and Mexican's American students step into college, they learn a new culture, they learn new practices and they learn new norms. They learn to find themselves and they learn about other people's culture. During college, many Mexican and Mexican American students face their first acculturation stress or experience bicultural stress. Bicultural stress consists of stressors like family traditions, discrimination, and peer stressors (Kim et al., 2018).

Conclusion

In college, Mexican and Mexican American students will find themselves between trying to continue family traditions and or moving on and creating new traditions with colleagues. Mexican and Mexican American students will face discrimination stressors from both classmates and family and peer stressor from peers at school. Although many will face acculturation stress for the first time in college many Mexican and Mexican American children will experience acculturation stress at an early age due to experiencing the acculturation stress of their parents. The acculturation theory will help participants understand the process of acculturation help them visually see where they stand on the model. Participants will also be able to understand why their parents were a certain way growing up. They can visually see if they did assimilate or if they rejected the assimilation.

CHAPTER THREE

METHODS

Introduction

The purpose of this study was to examine if there was a relationship with the self-reported mental health of Mexican and Mexican American social work students and self-reported experiences with racism and discrimination. This chapter describes the study design, sampling, data collection and instruments utilized in this study as well as the procedures, the protection of human subjects and the data analysis.

Study Design

This quantitative study was a descriptive study in nature as it explained the relationship of self-reported experiences of discrimination and racism on the self-reported mental health of Mexican and Mexican American social work students. The practical methodological strengths of this type of study were that with a survey study participant were able to participate easier, faster, and more accurately. However, some limitations of this design were that because of COVID and because we are under national and global stress this could have impacted the mental health variable and created an external factor that could not be controlled.

Sampling

The population that participated in this study were social work students in a four-year college. Participants were at least 18 years old, who self-identified as Mexican and or Mexican American, and who identified as a BASW or MSW student. Participants had to meet the criteria to be able to participate in this study.

Inclusion and exclusion criteria: The inclusion criteria for each participant were (a) at least 18 years, (b) self-identify as Mexican and or Mexican American, (c) enrolled in college, (d) self-identify either BASW or MSW student.

Estimated Sample Size: To determine whether there was a relationship between self-reported experiences with racism and discrimination and self-reported mental health of Mexican and Mexican American social work students the sample size had to have at least 100 participants to be effective and to achieve a valid conclusion. If the sample size was too small, then the conclusion and data would have been invalid and there would have not been enough data collected to support the hypothesis (Deziel, 2018). To have a statistical significance the sample size had to be at least 100 participants. The higher the participant sample size the more effective the conclusion would be and the higher the chance to prove the hypotheses (Deziel, 2018).

Data Collection and Instruments

With COVID still being a threat to the world, participants were recruited from the University via different online forms. Thus, social work students were more easily accessible to the researcher due to the cooperation and assistance of the Director of the School of Social Work and because of the recruitment challenges that the researcher faced as the result of COVID-19 and the corresponding lockdown and restriction placed on people living in Southern California as well as the United States. Participants were given a consent form that explained the nature of the study and the limits of it. A pre-screening was administered to determine if the participant met the criteria – this was included in the recruitment e-mail sent to all BASW and MSW students. Those willing to participate would click on a link to the Qualtrics survey where the participant would once again be asked if they met the 3 screening-in criteria. If so, they would be allowed to begin the survey. Surveys would be administered through Qualtrics, a survey software tool use to send and analyze surveys online.

Data Analysis

Data was collected using Qualtrics and exported into SPSS file. Univariate statistics such as frequencies, means, minimums, maximums, range, and bivariate statistics such as chi-square, Pearson r coefficient, simple linear regression, independent sample t-test, and one-way ANOVA were utilized to describe the sociodemographic characteristics of the sample. Tests were also

completed to tests whether subjects' experiences with racism and discrimination correlated with CES-D 10 Scores (the abbreviated depression scale version commonly used as a proxy variable to measure general mental health and has been documented to have internal consistency reliability coefficients rated as "satisfactory" (Cronbach $\alpha = 0.88$).

Procedures

To begin collecting data, the research study had to be approved by the Institutional Review Board (IRB). Once the study was approved the survey was distributed to all BSW and MSW students and shared through various social media platforms like Instagram and Facebook. Once the students received the email and survey link, participants were asked to do a pretest criterion test to see if they met the requirement. If the participant met the requirement, they received an informed consent form. The consent form addressed the nature and purpose of the study along with their rights as a participant. The consent form informed the participant that their participation was voluntary, and they had the right to decline to participate at any time during the survey. The consent form informed the participants that the survey was anonymous, and no name was required to participate. At the bottom of the consent form, a link to the survey was provided and participants were able to begin. Once the participant completed the criteria screening and were given the consent form that explained the nature of the study and the limits of it. Surveys were given. Once the survey was completed the researcher oversaw entering the data into a safe file. The

researcher transcribed all the participants' information and coded them. The data collected will remain safely stored away under a password for a total of 3 years, after which time the data will be destroyed.

Measures

Gender: In this study gender was captured on a 2-item question, with the response options of male and female. This was coded into two nominal categories.

Age: In this study age was captured by a survey question allowing participants to type in their age in a box.

Cultural stressors: In this study the cultural stressors focused on were discrimination and racism experiences. The Minority Status scale (Arbona & Jimenez, 2014), which is a self-report measure of minority stress related to having a minority status will be utilized to ask different questions related to language barriers, immigration-related stressors, and discrimination. A sample question for language barriers could be "Did your parents ever get mad at you because you did not know how to translate from English to Spanish, or Spanish to English, for them when you were growing up?" and using a scale of 1-5, 1 meaning Never and 5 meaning all the time can describe how much of an impact immigration-related stressor had on Mexican and Mexican American children (ordinal).

Mental Health: In this study mental health was captured through scaling survey questions. Participants were asked questions regarding their mental health to determine if mental health and cultural stressors had a relationship. For example, a survey question asked, “on a scale of 0-3, 0 meaning rarely or none of the time and 3 meaning most or almost all the time did you feel depressed?”.

Protection of Human Subjects

All participant’s confidentiality and anonymity were protected at all times. Participants were given a consent form at the beginning of the survey to ensure they understood the purpose of the study, their rights as participants, and understood how confidentiality and anonymity would be protected. The surveys and data from this survey were protected on a password-protected file and followed all HIPPA guidelines. Once the project was completed, all the data and surveys were store in a safe place where they will remain for at least 3 years.

Conclusion

This research aimed to describe whether there was a relationship between self-reported experiences with racism and discrimination and self-reported mental health of Mexican and Mexican American social work students. Data was collected through surveys distributed by Dr. McAllister via emails and social media platforms like Instagram. The prospective population that was surveyed was Mexican and Mexican American social work students who attend the Cal

State University of San Bernardino. A sample size of 100 participants was administered to have an effective statistical significance and participants had to meet a criterion to participate in this study.

CHAPTER FOUR

RESULTS

Introduction

This chapter will first describe the demographics reported by the participants in this study and explain the descriptive statistics of this study. Secondly, the researcher will review the data analyzed and explain the tests that report whether subjects' experiences with racism and discrimination are correlated with CES-D 10 Scores. Lastly, the researcher will explain the significant values for this study and discuss the results.

Demographics

In this study, there were a total of 101 participants. Table 1 illustrates the demographics characteristics of the participants in this study. As seen in Table 1 majority of the participants identified as female (82.2%) compare to male (8.9%) with a missing value of 8.9% who did not identify as female or male. Participants in this study ranged from 18-44 years old. From the sample collected, 60.4% of the participants were between 18-27 and 35.6% were between 28-44. When asked what their parents' highest education more than half of the participants reported less than a high school degree (51.5%), 23 (22.8%) reported a high school degree or equivalent, 16 (15.8%) reported some college but no degree, 2 (2%) reported an associate degree, 4 (4%) reported a bachelor's degree, and one (1%) reported a graduate degree. When asked about their education level 15

(14.9%) reported being a junior BASW student, 11 (10.9%) reported being a senior BASW student, 34 (33.7%) reported being a foundation year MSW student and 37 (36.6%) reported being an advance-year MSW student.

Additionally, participants were asked if they were born in the United States and 91 (90.1%) reported being born in the United States while only 7 (6.9%) reported not being born in the United States. When asked about their parents and if they were born in the United States 13 (12.9%) participants reported both of their parents being born in the United States, 8 (7.9%) participants reported one of their parents being born in the United States and 77 (76.2%) participants reported neither of their parents being born in the United States.

Table 1. Demographic Characteristics of Participants (N=101)

Variable	Frequency (N)	Percentage (%)
Gender		
Female	83	82.2
Male	9	8.9
Missing	9	8.9
Age		
0-27	61	60.4
28->	36	35.6
Missing	4	4.0
Parent Education Level		
Less than High School degree	52	51.5
High School degree or equivalent	23	22.8
Some college but no degree	16	15.8
Associate degree	2	2.0
Bachelor's degree	4	4.0
Graduate degree	1	1.0
Missing	3	3.0
Current Highest Education Level		

I am a junior BASW student	15	14.9
I am a senior BASW student	11	10.9
I am a foundation-year MSW student	34	33.7'
I am an advance-year MSW student	37	36.6
Missing	4	4.0
<hr/>		
Born in the United States		
Yes, I was born in the United States	91	90.1
No, I was NOT born in the United States	7	6.9
Missing	3	3.0
<hr/>		
Parents born in the United States		
Both of my parents were born in the United States	13	12.9
ONE of my parents was born in the United States	8	7.9
NEITHER of my parents was born in the United States	77	76.2
Missing	3	3.0
<hr/>		

Experience Growing Up

Participants of the study were asked about their personal experiences growing. Table 2 shows the descriptive statistics of their experience. When asked if they grew up having to translate for their parents, family, and family friends because they did not understand English most of the participants (63.2%) reported either most of the time or all the time, whereas 18 (17.8%) reported never. When asked if their parents ever got mad at them when they were growing up because they did not know how to translate from English to Spanish, or Spanish to English, majority reported sometimes (30.7%), while only 18 (17.8%) reported never. When asked if their parents ever emphasized the value or importance of college education growing up more than 70% reported either all the time or most of the time while only 2 (2%) reported never. When asked if

their family was supportive and understanding of their educational goals and aspirations again more than 70% reported either all the time or most of the time while only 2 (2%) reported never. When asked if they felt like they were on their own when it came to receiving support, guidance, and help concerning their education goals and aspirations majority reported either all the time or most of the time 41 (40.6%) and 9 (8.9%) reported never.

Table 2. Experience Growing Up

Variables	Frequency (N)	Percentage (%)
Growing you did you have to translate for your parents, family, and family friends because they did not understand English?		
Never	18	17.8
Rarely	2	2.0
Sometimes	15	14.9
Most of the time	26	25.7
All the time	38	37.6
Missing	2	2.0
Did your parents ever get mad at you because you did not know how to translate from English to Spanish, or Spanish to English, for them when you were growing up?		
Never	18	17.8
Rarely	16	15.8
Sometimes	31	30.7
Most of the time	17	16.8
All the time	17	16.8
Missing	2	2.0
Did your parents ever emphasize the value or importance of a college education to you when you were growing up?		
Never	2	2.0
Rarely	10	9.9

Sometimes	14	13.9
Most of the time	10	9.9
All the time	63	62.4
Missing	2	2.0
Is or was your family supportive and understanding of your educational goals and aspirations?		
Never	2	2.0
Rarely	7	6.9
Sometimes	16	15.8
Most of the time	28	27.7
All the time	46	45.5
Missing	2	2.0
Did or do you feel like you are/were on your own when it came to receiving support, guidance, and help concerning your education goals and aspirations?		
Never	9	8.9
Rarely	9	8.9
Sometimes	19	18.8
Most of the time	21	20.8
All the time	41	40.6
Missing	2	2.0

Experiences with Discrimination and Racism

The participants in this study were also asked to report their experiences with discrimination and racism. Table 3 shows the descriptive statistics on whether they experience or did not experience the following type of discrimination and racism. When asked if they have ever been unfairly fired 23.8% reported yes whereas 74.3% reported no. When asked for unfair reasons they have not been hired for a job 67.3% reported no while 30.7% reported yes. When asked if they have ever been denied a promotion 70.3% reported no

whereas 27.7% reported yes. When asked if they have been unfairly stopped, searched, questioned, physically threatened, or abused by the police 65.3% reported no whereas 32.7% reported yes. When asked if they have ever been unfairly discouraged by a teacher or advisor from continuing their education 39.6% reported yes while 58.4% reported no. When asked if they have ever been unfairly prevented from moving into a neighborhood because the landlord or a realtor refused to sell or rent you a house or apartment 83.2% reported no while 14.9% reported yes. When asked if they have ever moved into a neighborhood where neighbors made life difficult for you or your family 70.3% reported no and 26.7% reported ye. When asked if they have been denied a bank loan 89.1% reported no while 8.9% reported yes. When asked if they have ever received service from someone such as a plumber or car mechanic that was worse than what other people get 74.3% reported no while 23.8% reported yes.

Table 3. Experiences with Discrimination and Racism

Variable	Frequency (N)	Percentage (%)
At any time in your life, have you ever been unfairly fired?		
Yes	24	23.8
No	75	74.3
Missing	2	2.0
For unfair reasons, have you ever not been hired for a job?		
Yes	31	30.7
No	68	67.3
Missing	2	2.0
Have you ever been unfairly denied a promotion?		

Yes	28	27.7
No	71	70.3
Missing	2	2.0
Have you ever been unfairly stopped, searched, questioned, physically threatened, or abused by the police?		
Yes	33	32.7
No	66	65.3
Missing	2	2.0
Have you ever been unfairly discouraged by a teacher or advisor from continuing your education?		
Yes	40	39.6
No	59	58.4
Missing	2	2.0
Have you ever been unfairly prevented from moving into a neighborhood because the landlord or a realtor refused to sell or rent you a house or apartment?		
Yes	15	14.9
No	84	83.2
Missing	2	2.0
Have you ever moved into a neighborhood where neighbors made life difficult for you or your family?		
Yes	27	26.7
No	71	70.3
Missing	3	3.0
Have you ever been unfairly denied a bank loan?		
Yes	9	8.9
No	90	89.1
Missing	2	2.0
Have you ever received service from someone such as a plumber or car mechanic that was worse than what other people get?		
Yes	24	23.8
No	75	74.3
Missing	2	2.0

Self-Reported Discrimination and Racism

If a participant answered yes to any of the previous questions from the previous table, the participants of the study were also asked to report why they believed they were discriminated against. Table 4 shows what participants perceived were the reasons for their discrimination. 45.5% of the participants reported they believed they were discriminated against because of their ancestry or national origins. 58.4% of the participants reported they believed they were discriminated against because of their gender, 57.4% reported they believed they were discriminated against because of their race, 51.5% reported their age was a reason they believed they have been discriminated against, and 44.6% believed it was their socioeconomic status. About 20% of the participants in this study did not complete this section which means 20% of the participants did not experience any type of discrimination according to the questions in this study.

Table 4. Self-Reported Discrimination and Racism

Variables	Frequency (N)	Percentage (%)
Your ancestry or National origins		
Yes	46	45.5
No	34	33.7
Missing	21	20.8
The way that you speak		
Yes	28	27.7
No	51	50.5
Missing	22	21.8
Your Gender		
Yes	59	58.4
No	20	19.8
Missing	22	21.8
Your Race		

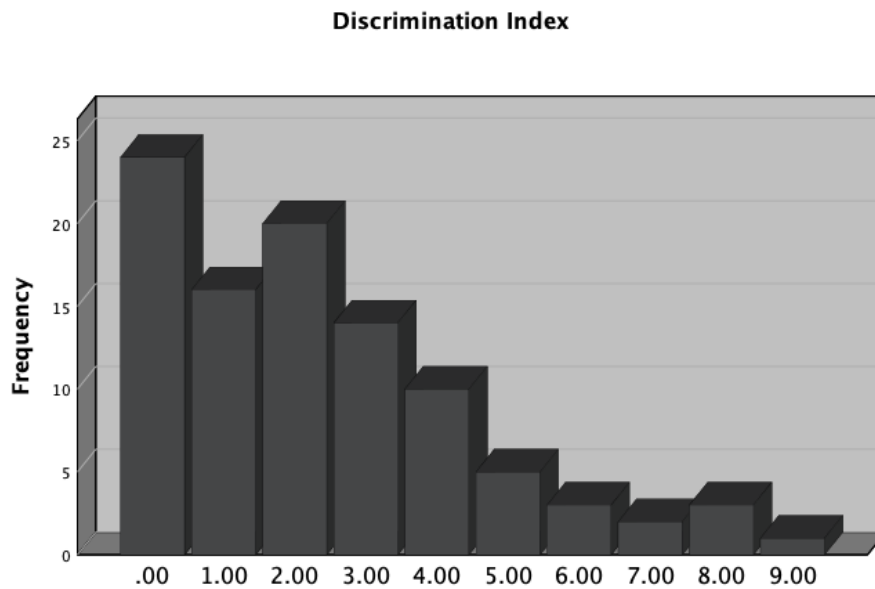
Yes	58	57.4
No	21	20.8
Missing	22	21.8
Your Age		
Yes	52	51.5
No	28	27.7
Missing	21	20.8
Your Religion		
Yes	6	5.9
No	73	72.3
Missing	22	21.8
Your Height		
Yes	12	11.9
No	67	66.3
Missing	22	21.8
Your Weight		
Yes	13	12.9
No	65	64.4
Missing	23	22.8
Dark skin		
Yes	27	26.7
No	52	51.5
Missing	22	21.8
Light Skin		
Yes	16	15.8
No	63	21.4
Missing	79	21.8
The color of your eyes		
Yes	8	7.9
No	70	69.3
Missing	23	22.8
Some other aspect of your physical appearance such as the way that you dress		
Yes	33	32.7
No	45	44.6
Missing	23	22.8
Your sexual orientation		
Yes	3	3.0
No	75	74.3
Missing	23	22.8
Your Education levels		
Yes	26	25.7
No	50	49.5

Missing	25	24.8
Your socioeconomic status		
Yes	45	44.6
No	33	32.7
Missing	23	22.8

Presentation of Experience with Discrimination

. Table 5. provides a visual of how many participants reported discrimination based on the questions of this study. When looking at the overall report of how many participants reported experiencing discrimination based on the questions of this study only one person reported experiencing all 9 forms of discrimination. Although more than 20% of participants reported no discrimination based on the questions to this survey majority of the participants reported experiencing more than one form of discrimination.

Table 5. Presentation of Experience with Discrimination



Correlation Between Discrimination and the Mental Health Scale

Table 6. shows a moderately positive correlation between discrimination and mental health. The p-value is .002. and the Pearson correlation is .320 which represents a moderately positive correlation. As levels of anxiety go up, participants report levels of discrimination. Someone who experiences discrimination shows a higher level of anxiety. Someone who experiences less discrimination will report less anxiety.

Table 6. Correlation Between Discrimination and the Mental Health Scale

<i>Correlations</i>		Discrimination_Index	CES-D 9-item scale
Discrimination_Index	Pearson Correlation	1	.320**
	Sig. (2-tailed)		.002
	N	98	92
CES-D 9-item scale	Pearson Correlation	.320**	1
	Sig. (2-tailed)	.002	
	N	92	93

** . Correlation is significant at the 0.01 level (2-tailed).

Presentation of the Findings

A Chi-square statistic was performed for all independent variables and the dependent variable, CES-D modified 9-item depression scale. The Chi-squares of independence was performed to examine the relationship between mental health and discrimination. The test showed that there was a significant association between ancestry/national origins, gender, age, socioeconomic status, light skin, and experience with a plumber/car mechanic. There was a significant relationship between participants who have ever received service from someone such as a plumber or car mechanic that was worse than what other people get and mental health $\chi^2 (1, N=93) = 6.7, p = .010$. People with a high level of anxiety are more likely to report they experience this kind of discrimination compare to people with low levels of anxiety. People are more

likely to report never experiencing this form of discrimination when having a low level of anxiety.

When looking at what participants felt were the reason, they were discriminated there was a significant relationship between participants' ancestry/national origins and mental health $\chi^2 (1, N=76) = 11.9, p = .001$. People with high levels of anxiety were more likely than expected to perceive their ancestry and or national origins resulted in discrimination. The relation between gender and mental health was also significant $\chi^2 (1, N = 76) = 5.8, p = .016$. People with a high level of anxiety are more likely to report experiencing discrimination due to their gender. People with high levels of stress are likely to report experiencing discrimination due to their age $\chi^2 (1, N = 77) = 9.8, p = .002$.

The relation between socioeconomic status and mental health was also significant, $\chi^2 (1, N = 75) = 5.7, p = .016$. Those who experience a higher level of stress are more likely to identify their socioeconomic status as reasoning to them experiencing discrimination whereas those with a low level of anxiety are likely to not report \ their socioeconomic as a factor for their experience with discrimination. A significant correlation was also reported with participants who reported their light skin led to discrimination experiences $\chi^2 (1, N=76) = 4.1, p = .044$. Those who experience a high level of stress are more likely to report their light skin as a reason for their discrimination experiences.

Conclusion

This chapter reported the demographics of the participants in this study. This chapter explained the results of this quantitative study to understand the significant relationships between mental health and discrimination. After all the chi-squares were completed, the results indicated that it was only statistically significant between a person's ancestry/national origins, gender, age, socioeconomic status, light skin, and experience with a plumber/car mechanic. Those who have a higher level of stress are more likely to report feeling discriminated against than those with a low level of stress.

CHAPTER FIVE

DISCUSSION

Introduction

This chapter will provide more insight into the data collected from the surveys. It will explain the significant findings and connect them with the existed literature on the mental health of Mexican and Mexican American students. Furthermore, this chapter will discuss the limitations of the study, the suggestions for social work practice, the suggestions for social work policies and the recommendations for future social work research.

Discussion

The literature suggested that Mexican and Mexican American individuals who experienced discrimination both on an individual level and on a group, level were more likely to perceive more societal discrimination and report depressive symptoms. The literature also suggested that females were more likely to internalize mental health symptoms than males (Brietzke & Perreira, 2017). The finding from this study contributed to the literature. There was statistical significance between mental health and discrimination. Because the researcher accidentally left 1 item out of the CES-D 10 item scale for the survey, the researcher summed the scores for all 9 items, divided the sample into two halves, under and above the mean score for the sample, into a “low-high”

dichotomous variable however this did not impact this study. The first significant statistic finding was gender. An individual who had higher levels of stress/ anxiety was more likely to report being discriminated against. In this study 82.2% identified as female, while only 8.9% identified as male. An individual who had high levels of stress was also more likely to report discrimination against their age, their socioeconomic status, their skin color, and their ancestry/national origin.

Limitations

This study presented various limitations with the first one being the impact of the COVID-19 pandemic. First, it made it difficult to recruit participants for this study. A study sample that could have been conducted within couple of weeks by attending social work classes and recruiting people in person took about a month because of the difficulty recruiting people through emails, and social media platforms. Although this study sampled 101 participants, recruitment and participation were limited and difficult thus making it hard to reach a higher sample size. Secondly, due to the COVID-19 pandemic participants could have already been impacted with their mental health before this survey thus creating an external factor that could not be controlled and skewing the results of this study. Thirdly, because the COVID-19 pandemic recruitment was done online and through social media, the researcher was unable to make sure everyone

who participated was a social work student because data was collected anonymously.

Another limitation was the lack of previous research studies on this topic. The limited availability of mental health articles and information on mental health made it difficult to expand upon. While the researcher planned to utilize the CES-D 10 items scale in this study having left one item out in the survey made it difficult at the beginning because of the lack of info on cut-off scores to indicate depression. Instead, the researcher had to add all 9 items of the CES-D scale to form a score. Then take the mean score and use that as the halfway point that divided the sample into 2 parts a “low-high” dichotomous variable.

Recommendations for Social Work Practice

Social Work Practice

Based on the data collected from this quantitative research, there are several recommendations for social work practice. First colleges should provide some type of support group/ support club for students who are first-generation, who have parents that depend on them, and for those that feel lonely. This study provided evidence that social work students who experienced discrimination had a higher level of stress and those with a higher level of stress also perceived their age, gender, and socioeconomic status to play a factor in discrimination. Since this study only covered social work students there is not enough evidence that could prove all Mexican and Mexican American students feel this way however

making it a requirement for first generation students to take a few counseling sessions could help the mental health of an individual especially one who is going into a different culture than there's thus causing many mental health problems.

Another suggestion to social work practice would be to offer counseling services for Mexican/Mexican American youth in school and community settings. If children are provided the support and education on mental health at such a young age, they will have the resources/toolbox needed to help them cope as they grow and learn to assimilate to new cultures like school, community, and friends. By offering these educational mental health courses at the elementary, middle, and high schools' parents will also get the opportunity to learn and educate themselves. It will help parents be aware of the mental health of their own child, will teach them how to offer support, and how to help them. Since many Mexican and Mexican American families are not aware of the effects of mental health problems offering those courses may impact and change a family's life for the better.

Social Work Policy

The results in this study showed how people still feel they are getting discriminated against by the way they look (age, race, gender) and has proven how much it affects their mental health. This study has proven that things have not changed despite being in the 21st century. As a social worker advocating for mental health education for children to be supported in school settings should be

a must since some children cannot attend counseling outside of school and providing mental health support in class setting would be accessible to many children. This study also indicated how important policy advocacy is to make changes within the administration. Policy advocacy is needed to support the vulnerable populations within the communities.

Social Work Research

The lack of research on the mental health of Mexican and Mexican Americans in the community made it difficult to learn and see what others have done and what has and has not worked. By researching in topics that are very popular people will be able to provide the best support for these families. Awareness will continue to increase and mental health in Mexican and Mexican American individuals will begin to get normalize. The stigma of mental health will begin to disappear as we keep practicing it and researching upon.

Conclusion

The purpose of this research study was to examine if there was a relationship between the self-reported mental health of Mexican American social work students and self-reported experiences with racism and discrimination. The results of this study showed that there is a relationship between self-reported mental health and self-reported discrimination and racism. High levels of stress/anxiety cause people to perceived discrimination in some type of form. In this study, the discrimination that was statistically significant was

ancestry/national origins, gender, age, socioeconomic status, light skin, and experience with a plumber/car mechanic. The results of this study align with the literature piece of this study. Those who experience discrimination face levels of stress and anxiety. Research suggests the importance of mental health awareness within this population is important especially at a young age to assist families, provide support, and care for the children. Policy changes also are needed to the Mexican/ Mexican American population with their stressors. Finally, further research is to determine what works best to address this populations mental health.

APPENDIX A
INFORMED CONSENT

Informed Consent

The study in which you are asked to participate is designed to examine the effects of self-reported experiences of discrimination and racism on the self-reported mental health of Mexican and Mexican American social work students. The study is being conducted by Karina Duque, an advanced year graduate student, under the supervision of Dr. Herb Shon, Assistant Professor in the School of Social Work at California State University, San Bernardino (CSUSB). The study has been approved by the Institutional Review Board Social Work Sub-committee at CSUSB.

Purpose: The purpose of this study is to examine the effects of self-reported experiences of discrimination and racism on the self-reported mental health of Mexican and Mexican American social work students.

Description: Participants will be asked a series of questions on mental health, discrimination and racism; Demographics will be collected but no personal identifiers.

Participation: Your participation in this research study is voluntary. You can refuse to participate in the study or discontinue your participation at any time without consequences.

Confidentiality: Your responses will remain confidential throughout the entire study and responses will be destroyed after the completion of the research project.

Duration: The survey will take about 10 to 15 minutes to complete.

Risks: Although not anticipated there may be some discomfort in answering questions. Students have the option to skip the question or stop answering questions at any point.

Benefits: There will not be any direct benefits to the participants of this study.

Contact: If you have any questions about this study, please feel free to contact Dr. Herb via email at herb.shon@csusb.edu

Results: Results of the study can be obtained from the Pfau Library ScholarWorks database at California State University, San Bernardino June 2021.

This is to certify that I acknowledge this information and I am accepting to participate in this study.

Please mark with an X _____

Date: _____

APPENDIX B
SURVEY QUESTIONNAIRE

MEXICAN AND MEXICAN AMERICAN STUDENT'S MENTAL HEALTH AND CULTURAL STRESSORS

Eligibility Criteria: Pre-Screening Survey

- 1) Are you at least 18 years of age?
 - a) Yes (Please continue the survey)
 - b) No (Please discontinue the survey now. You must be at least 18 years of age to participate in this study)

- 2) Do you self-identify as either Mexican or Mexican American?
 - a) Yes (Please continue with the survey)
 - b) No (Please discontinue the survey now. This survey focuses only on adults who self-identify as Mexican or Mexican American. Thank you.)

- 3) Are you currently a BASW or MSW student?
 - a) Yes (Please continue with the survey)
 - b) No (Please discontinue the survey now. This survey focuses only on adults who self-identify as Mexican or Mexican American and who are currently a BASW or MSW student. Thank you.)

Beginning of Survey

1. Growing up did you have to translate for your parents, family, and family friends because they did not understand English?
 - a. Never
 - b. Rarely
 - c. Sometimes
 - d. Most of the time
 - e. All the time

2. Did your parents ever get mad at you because you did not know how to translate from English to Spanish, or Spanish to English, for them when you were growing up?
 - a. Never
 - b. Rarely
 - c. Sometimes
 - d. Most of the time
 - e. All the time

3. Did your parents ever emphasize the value or importance of a college education to you when you were growing up?
 - a. Never

- b. Rarely
 - c. Sometimes
 - d. Most of the time
 - e. All the time
- 4. Is or was your family supportive and understanding of your educational goals and aspirations?
 - a. Never
 - b. Rarely
 - c. Sometimes
 - d. Most of the time
 - e. All the time
- 5. Did or do you feel like you are/were on your own when it came to receiving support, guidance, and help concerning your education goals and aspirations?
 - a. Never
 - b. Rarely
 - c. Sometimes
 - d. Most of the time
 - e. All the time

Can you tell me if any of the following has ever happened to you?

- 6. At any time in your life, have you ever been unfairly fired?
 - a. Yes
 - b. No
- 7. For unfair reasons, have you ever not been hired for a job?
 - a. Yes
 - b. No
- 8. Have you ever been unfairly denied a promotion?
 - a. Yes
 - b. No
- 9. Have you ever been unfairly stopped, searched, questioned, physically threatened or abused by the police?
 - a. Yes
 - b. No
- 10. Have you ever been unfairly discouraged by a teacher or advisor from continuing your education?
 - a. Yes
 - b. No
- 11. Have you ever been unfairly prevented from moving into a neighborhood because the landlord or a realtor refused to sell or rent you a house or apartment?
 - a. Yes
 - b. No
- 12. Have you ever moved into a neighborhood where neighbors made life difficult for you or your family?

- a. Yes
- b. No
- 13. Have you ever been unfairly denied a bank loan?
 - a. Yes
 - b. No
- 14. Have you ever received service from someone such as a plumber or car mechanic that was worse than what other people get?
 - a. Yes
 - b. No

If you answered “yes” to any of the above questions (#6 to #14), what do you think was the main reason(s) for you being treated in these ways? Please answer “Yes” or “No” to each of the possible explanations for you being treated in the above ways.

- 15. Your Ancestry or National Origins
 - a. Yes
 - b. No
- 16. The way that you speak
 - a. Yes
 - b. No
- 17. Your Gender
 - a. Yes
 - b. No
- 18. Your Race
 - a. Yes
 - b. No
- 19. Your Age
 - a. Yes
 - b. No
- 20. Your Religion
 - a. Yes
 - b. No
- 21. Your Height
 - a. Yes
 - b. No
- 22. Your Weight
 - a. Yes
 - b. No
- 23. The dark skin
 - a. Yes
 - b. No
- 24. Light skin
 - a. Yes
 - b. No
- 25. The color of your eyes
 - a. Yes
 - b. No
- 26. Some other Aspect of Your Physical Appearance such as the way that you dress

- a. Yes
 - b. No
27. Your Sexual Orientation
- a. Yes
 - b. No
28. Your Education Level
- a. Yes
 - b. No
29. Your socioeconomic status
- a. Yes
 - b. No

Below is a list of the ways you might have felt or behaved. Please tell me how often you have felt this way during the past week.

- Rarely or none of the time (Less than 1 Day)
- Some or a Little of the Time (1-2 days)
- Occasionally or a Moderate Amount of the Time (3-4 days)
- Most or All of the Time (5-7 days)

30. I was bothered by things that usually don't bother me.

(0 = Rarely or None of the Time, 1 = Some or Little of the Time, 2 = Moderately or Much of the time, 3 = Most or Almost All the Time)

31. I had trouble keeping my mind on what I was doing.

(0 = Rarely or None of the Time, 1 = Some or Little of the Time, 2 = Moderately or Much of the time, 3 = Most or Almost All the Time)

32. I felt depressed.

(0 = Rarely or None of the Time, 1 = Some or Little of the Time, 2 = Moderately or Much of the time, 3 = Most or Almost All the Time)

33. I felt that everything I did was an effort.

(0 = Rarely or None of the Time, 1 = Some or Little of the Time, 2 = Moderately or Much of the time, 3 = Most or Almost All the Time)

34. I felt hopeful about the future. *

(0 = Rarely or None of the Time, 1 = Some or Little of the Time, 2 = Moderately or Much of the time, 3 = Most or Almost All the Time)

35. I felt fearful.

(0 = Rarely or None of the Time, 1 = Some or Little of the Time, 2 = Moderately or Much of the time, 3 = Most or Almost All the Time)

36. My sleep was restless.

(0 = Rarely or None of the Time, 1 = Some or Little of the Time, 2 = Moderately or Much of the time, 3 = Most or Almost All the Time)

37. I was happy. *

(0 = Rarely or None of the Time, 1 = Some or Little of the Time, 2 = Moderately or Much of the time, 3 = Most or Almost All the Time)

38. I felt lonely.

(0 = Rarely or None of the Time, 1 = Some or Little of the Time, 2 = Moderately or Much of the time, 3 = Most or Almost All the Time)

39. I could not “get going.”

(0 = Rarely or None of the Time, 1 = Some or Little of the Time, 2 = Moderately or Much of the time, 3 = Most or Almost All the Time)

40. How do you describe yourself?

- a. Female
- b. Male
- c. Queer
- d. Nonbinary
- e. Trans
- f. Decline to respond

41. What is your current age in years?

- a. _____

42. What is your parents' highest level of education? Please answer for your parent who has the highest level of education.

- a. Less than high school degree
- b. High School degree or equivalent
- c. Some college but no degree
- d. Associate degree
- e. Bachelor's degree
- f. Graduate degree

43. What is your current highest education level?

- a. I am a junior BASW student.
- b. I am a senior BASW student.

- c. I am a foundation-year MSW student.
- d. I am an advanced-year MSW student.

44. Were you born in the United States?

- a. Yes, I was born in the U.S.
- b. No, I was NOT born in the U.S.

45. Where were your parents born?

- a. BOTH of my parents were born in the United States.
- b. ONE of my parents was born in the United States.
- c. NEITHER of my parents was born in the United States.

Citations:

Williams, D.R., Yu, Y., Jackson, J.S., and Anderson, N.B. "Racial Differences in Physical and Mental Health: Socioeconomic Status, Stress, and Discrimination." *Journal of Health Psychology*. 1997; 2(3):335-351.

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APPENDIX C
INSTITUTIONAL REVIEW BOARD APPROVAL LETTER



CSUSB INSTITUTIONAL REVIEW BOARD
Administrative/Exempt Review Determination
Status: Determined Exempt
IRB-FY2021-82

Herbert Shon Karina Duque
CSBS - Social Work
California State University, San Bernardino
5500 University Parkway
San Bernardino, California 92407

Dear Herbert Shon Karina Duque:

Your application to use human subjects, titled "Cultural stressors on first generation students " has been reviewed and determined exempt by the Chair of the Institutional Review Board (IRB) of CSU, San Bernardino. An exempt determination means your study had met the federal requirements for exempt status under 45 CFR 46.104. The CSUSB IRB has not evaluated your proposal for scientific merit, except to weigh the risk and benefits of the study to ensure the protection of human participants. Important Note: This approval notice does not replace any departmental or additional campus approvals which may be required including access to CSUSB campus facilities and affiliate campuses due to the COVID-19 pandemic. Visit the Office of Academic Research website for more information at <https://www.csusb.edu/academic-research>.

You are required to notify the IRB of the following as mandated by the Office of Human Research Protections (OHRP) federal regulations 45 CFR 46 and CSUSB IRB policy. The forms (modification, renewal, unanticipated/adverse event, study closure) are located in the Cayuse IRB System with instructions provided on the IRB Applications, Forms, and Submission webpage. Failure to notify the IRB of the following requirements may result in disciplinary action. The Cayuse IRB system will notify you when your protocol is due for renewal. Ensure you file your protocol renewal and continuing review form through the Cayuse IRB system to keep your protocol current and active unless you have completed your study.

- Ensure your CITI Human Subjects Training is kept up-to-date and current throughout the study.
- Submit a protocol modification (change) if any changes (no matter how minor) are proposed in your study for review and approval by the IRB before being implemented in your study.
- Notify the IRB within 5 days of any unanticipated or adverse events are experienced by subjects during your research.
- Submit a study closure through the Cayuse IRB submission system once your study has ended.

If you have any questions regarding the IRB decision, please contact Michael Gillespie, the Research Compliance Officer. Mr. Michael Gillespie can be reached by phone at (909) 537-7588, by fax at (909) 537-7028, or by email at mgillesp@csusb.edu. Please include your application approval number IRB-FY2021-82 in all correspondence. Any complaints you receive from participants and/or others related to your research may be directed to Mr. Gillespie.

Best of luck with your research.

Sincerely,

Nicole Dabbs

Nicole Dabbs, Ph.D., IRB Chair
CSUSB Institutional Review Board

ND/MG

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